

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006**Complete if Known**

Application Number	10/019,587
Filing Date	March 13, 2002
First Named Inventor	Kanbara et al.
Examiner Name	Prabodh M. Dharia
Art Unit	2629
Attorney Docket No.	TPS014-US1

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 300.00

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 18-0560 Deposit Account Name: Tyco Electronics Corporation
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
- under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____ - 20 or HP = _____ x _____ = _____				Fee (\$)
HP = highest number of total claims paid for, if greater than 20				Fee Paid (\$)

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 3 or HP = _____ x _____ = _____			
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				

4. Other Fee(s)

	Fees Paid (\$)
Extension fee for response within the first month	120.00
Other: Filing of Information Disclosure Statement under 37 CFR 1.97(c)(2)	180.00

SUBMITTED BY

Signature	<u>Marquerite E. Gerstner</u>	Registration No. (Attorney/Agent)	32,695	Telephone	650-361-2483
Name (Print/Type)	Marquerite E. Gerstner			Date	September 18, 2006

Certificate of Mailing (37 CFR 1.8)

I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below:

Date of deposit: September 18, 2006 Name (printed): Marquerite E. Gerstner

Signature: Marquerite E. Gerstner

09/21/2006 RFEKADU1 00000038 10019587

02 FC:1251

120.00 DA

SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

09/21/2006 RFEKADU1 00000038 10019587

01 FC:1806 180-00-DA



PATENT APPLICATION
TPS014-US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of) Group Art Unit: 2629
KANBARA ET AL.)
Application No. 10/019,587) Examiner: Prabodh M. Dharja
Filed: March 13, 2002) TYCO ELECTRONICS CORPORATION
For: AN ACOUSTIC CONTACT) 307 Constitution Drive
DETECTING DEVICE) Menlo Park, CA 94025
September 18, 2006

REPLY
and

DISCLOSURE STATEMENT UNDER 37 CFR § 1.56

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This paper is filed in reply to the Office Action mailed May 16, 2006. An extension of one month for reply is respectfully requested. Please charge the fee for this extension (\$120) to Deposit Account No. 18-0560. Please charge any additional necessary fees or apply any overpayments to Deposit Account No. 18-0560. Reconsideration, re-examination, and allowance are respectfully requested in view of the Amendments and Remarks below.

Amendments to the Claims are reflected in the listing of claims which begins on page 2. Remarks begin on page 4.

09/21/2006-RFEKADU1-00000038 180560-10019587

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01 FC:1806 180.00 DA

CERTIFICATE OF MAILING UNDER 37 CFR §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Name of person signing certificate: Marquerite E. Gerstner

Signature: Marquerite E. Gerstner Date: September 18, 2006

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